

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist	c(s) <u>(. (</u>	LIVIA	ZINK				
II. Name of lobbyist	s's partnership,	firm or co	rporation,	if any:			
OF	EN DEM	OCRAC	y Ac-	TION			
(Na	me of partnership	, firm or co	rporation)				
Ц	+ PARK	ST #	301	CONCORI) NH	03361	
`	Street)		(Town/City	<i>'</i>)	(State)	(Zip Code)	
(63) 715-8 (Telephone)	197	_ ()	(Fax)	e-mail Olivia	<u>oopendem</u>	ocracy.me
III. This statement or reportable expense	-		-	-	-	ay file a separate re	port for
☐ All reportable tra	nsactions occur	ring in the	months prio	r to the reportin	g date relative to t	he following client:	
			·		····		
<u>OR</u>	(Full Name of	Client as it	appears on th	e Lobbyist Regis	tration Form)		
	•	lobbyist (i	ncluding the	lobbyist's fami	ly), or the lobbyin	g firm listed below w	hich are
IV. Date of Report Reports cover: act	April 25, 20 ivity from date of		to 3/31/18		ly 25, 2018 🕱 om 4/1/18 to 6/30/1	8	
•	October 31, activity from 7/	2018 🗆			nuary 30, 2019 [] From 10/1/18 to 12/3	1/18	
V. There have been If this box is checked Concord, NH 03301.	l, complete just i					the last report. [State House, Room 2	□ 04,
VI. Check if addition	nal reports are	attached:					
☐ If you have recei	-			ust file Addend	um A- Fees and I	Expenses	•
Expense Reimburser	nent		•			eport of Honorariums	
☐ If you, your firm	ı, or your family	has made	political cor	ntributions, you	must file Addend	um C – Political Conf	ributions
Sworn Statement/A I have read RSA 15, and complete to the l	RSA 15-B, RSA	14-C and		nd hereby swear	or affirm that the	foregoing information	on is true
Overa ?	zonel	,			July 25	5, 2018	
(Signature of lobby)	st)			_	(D	ate)	
C. OUVIA ZI (Print Name of lobb	NK					RECEIV JAN 10 2	/ED
(FILL INAME OF 1000	y 15t <i>)</i>					IAN 10 2	2019
						- A SAD	CHIRF
						NEW HAMP DEPARTMENT	OF STATE

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) C OINIQ ZINK	
П. Name of lobbyist's partnership, firm or corporation, if any:	
Open Democracy Action (Name of partnership, firm or corporation)	
III. Name of Client Open Democracy Action	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a)\$155:-
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$4(05.—
c) Total of all fees received to date (Add lines a and b)	0\$_620
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made be may be filed for the lobbyist(s)/firm a aggregate total of all expenses pai expenses; (b) the aggregate total of a le: meals purchased during a business than \$10 that is given to the personal with a value of \$25.00 or less); an orting period of greater than \$25.00 for the of greater than \$25.00 for the of greater than \$25, purchase of the er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$155
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$135.
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$465.
f) Total of all expenses year to date	ns_620.
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this repo
Paid to:	Amount:
Salary+Benifits	s <u>155</u>
(\$
	\$
	\$
	\$
	«
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	\$
Sworn Statement/Affirmation by Lobbyist	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affi	rm that the foregoing inform
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affinite true and complete to the best of my knowledge and belief.	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affi	rm that the foregoing inform

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State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying part	mership, firm, or corpo	oration: Open D	emocraci	Action
		or the partnership, firm, o		not related to any
particular client):		-	·• 	
Date of Report (check	one):			
April 25, 2018 □	July 25, 2018 💢	October 31, 2018 □	January 30, 2	2019 🗆
		he Statement of Income at Statement (insert the		
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affire complete to the best of		nformation on the Statem lief.	ent and each Adde	endum is true and
Signature of lobbyist))		V 14 25 (Date)	2018
Olivia Zini	ک			
(Print Name of lobbyis	t)			